

**Bureau of Prisons  
Health Services  
Health Screen**

Inmate Name: MANCINI, MARIO FERBO	Sex: M	Reg #: 11007-041	
Date of Birth: 02/23/1972	Provider: Ryle, Gretchen RN	Race: WHITE	
Encounter Date: 12/02/2009 09:38		Facility: MNA	

**Seizures:** Denied**Diabetes:** Denied**Cardiovascular:** Denied**CVA:** Denied**Hypertension:** Denied**Respiratory:** Denied**Sickle Cell Anemia:** Denied**Carcinoma/Lymphoma:** Denied**Allergies:**

<u>Allergy</u>	<u>Reaction</u>	<u>Date Noted</u>
Penicillin V Comments	Rash	11/12/2009

**Tuberculosis:**

**When Last PPD:** < 1 year  
**Last PPD Result:** Negative  
**Hx of Previous Disease:** No  
**Blood-tinged Sputum:** No  
**Night Sweats:** No  
**Weight Loss:** No  
**Fever:** No  
**Cough:** No  
**Comments:**

**Infectious Disease Risk Factors:**

**IV Drug Use:** No  
**IV Drug Use Needles:**  
**Sexual Partner IV Drug Use:** No  
**Sexual Partner IV Drug Use Needles:**  
**Female Sexual Partners (Last 5 Yrs):** None  
**Male Sexual Partners (Last 5 Yrs):** None  
**Condom Use:** Sometimes  
**Sexual Contact With HIV+ Individual:** No  
**Blood Product Transfusion:** No  
**Travel Outside US:** No  
**Tattoos:** Yes  
**Comments:** tattoos from prison

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**HIV History:****When Tested:** 2004**Test Result:** Negative**When Diagnosed AIDS:****Last CD4:****Comments:****Hepatitis:** Denied**Other Infectious Diseases:** Denied**Abuse History:** Denied**Physical:** No**Emotional:** No**Sexual:** No**Comments:** refuses to answer, states yes but "does not want to get into it."**Mental Health:****Level of Consciousness:** Alert and Oriented**Psychomotor Activity:** Normal**General Appearance:** Normal**Behavior:** Cooperative**Mood:** Appropriate to Content**Thought Process:** Goal Directed**Thought Content:** Normal**Hx of Mental Health Treatment:** None**Hx of Head Injury:** With Sequelae**Current Mental Health Treatment:** No**Current Mental Health Complaint:** No**Hx of Loss of Consciousness:** Yes**Past History of Suicide Attempt:** No**Current Suicide Ideation:** No**Suicide Prevention Initiated:** No**Comments:** Inmate states "I got hit in the jaw with a baseball bat in 1990 and i have steel plates in my jaw."**Substance Use History:**

	<u>Last Used</u>	<u>Frequency</u>	<u>Route</u>	<u>Type</u>	<u>Amount</u>
<b>Methamphetamine</b>	> 5 years	> 1 X per week	Smoked		

**Hx of Withdrawal Symptoms:****Comments:**

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**Current Painful Condition:**

**Location:** Inmate states " in state prison they knew i needed a disk removed from my neck put it off; said the feds have unlimited resources so have it done there; they put me on vicodin.

**Pain Interventions:**

<u>Date</u>	<u>Intervention</u>	<u>Pain Quality</u>	<u>Location</u>	<u>Pre</u>
12/02/2009 09:43	ibuprofen 800mg po	Pins and	Back-Upper	7

**Other Health Issues:****Current Medical Conditions:****Other Current Treatments:**

**Pregnant:** N/A

**Dental Assessment:** Denied

**Observations:**

**Draining Skin Lesions:** No

**Signs of Lice:** No

**Signs of Scabies:** No

**Signs of Recent Trauma:** No

**Recent Tattoos:** No

**Needle Marks:** No

**Signs of Rash:** No

**Open Sores:** No

**Wounds:** No

**Body Deformities:** No

**Tremors:** No

**Sweating:** No

**Comments:** denies

**Temperature:**

<u>Date</u>	<u>Time</u>	<u>Fahrenheit</u>	<u>Celsius</u>	<u>Location</u>	<u>Provider</u>
12/02/2009	09:49 MNA	97.6	36.4	Oral	Ryle, Gretchen RN

**Pulse:**

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Location</u>	<u>Rhythm</u>	<u>Provider</u>
12/02/2009	09:49	77	Via Machine	Regular	Ryle, Gretchen RN

**Respirations:**

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Provider</u>
12/02/2009	09:49 MNA	16	Ryle, Gretchen RN

**Blood Pressure:**

<u>Date</u>	<u>Time</u>	<u>Value</u>	<u>Location</u>	<u>Position</u>	<u>Cuff Size</u>	<u>Provider</u>
12/02/2009	09:49 MNA	112/73	Left Arm	Sitting	Adult-regular	Ryle, Gretchen RN

**Height:**

<u>Date</u>	<u>Time</u>	<u>Inches</u>	<u>Cm</u>	<u>Provider</u>
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<u>Date</u>	<u>Time</u>	<u>Inches</u>	<u>Cm</u>	<u>Provider</u>	
12/02/2009	09:49	MNA	68.0	172.7	Ryle, Gretchen RN

**Weight:**

<u>Date</u>	<u>Time</u>	<u>Lbs</u>	<u>Kg</u>	<u>Waist Circum.</u>	<u>Provider</u>
12/02/2009	09:49	MNA	225.0	102.1	Ryle, Gretchen RN

**Prosthetic Devices/Equipment:** Denied**Schedule:**

<u>Activity</u>	<u>Date Scheduled</u>	<u>Scheduled Provider</u>	<u>Priority</u>
PPD Administration	10/10/2010	Nurse	Normal

**Potential Items For Follow-up:**Item

Allergy - Penicillin V

Tattoos

History of Loss of Consciousness

Substance Abuse History

Current Painful Condition

PPD Administration Not Performed

**Cleared For Food Services:** Yes**Health Problems Newly Identified During This Encounter:**

<u>Type</u>	<u>Health Problem</u>	<u>Status</u>
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**Renew Medication Orders:**

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
46720-TAL	Amitriptyline 25 MG Tab UD	12/02/2009 09:38	Take one tablet by mouth at bedtime for pain **crush/empty** x 90 day(s)

**Indication:** Neuralgia neuritis, radiculitis, neuropathic pain

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**Renew Medication Orders:**

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
46721-TAL	Gabapentin 300 MG CAP	12/02/2009 09:38	<b>**crush/empty**</b> Take one capsule by mouth three times a day with 800 mg tablet x 90 day(s)  <b>Indication:</b> Neuralgia neuritis, radiculitis, neuropathic pain
46722-TAL	Gabapentin 800 MG TAB	12/02/2009 09:38	<b>**crush/empty**</b> Take one tablet by mouth three times a day (total dose 1100 mg) for pain x 90 day(s)  <b>Indication:</b> Neuralgia neuritis, radiculitis, neuropathic pain
46723-TAL	Ibuprofen 800 MG Tab	12/02/2009 09:38	Take one tablet by mouth three times daily with food x 90 day(s)  <b>Indication:</b> Neuralgia neuritis, radiculitis, neuropathic pain
46724-TAL	Risperidone 4 MG Tab UD	12/02/2009 09:38	Take one-half tablet (2 mg) by mouth at bedtime x 90 day(s)  <b>Indication:</b> Axis I: Unspecified schizophrenia

Instructed inmate how to obtain medical, dental, and mental health care.

**Copay Required:**No                      **Cosign Required:** Yes

**Telephone/Verbal Order:** Yes      **By:** Negron, Ivan L MD

**Telephone or Verbal order read back and verified.**

Completed by Ryle, Gretchen RN on 12/02/2009 09:53

Requested to be cosigned by Negron, Ivan L MD.

Cosign documentation will be displayed on the following page.